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To: Mail Stop AMENDMENT  
Examiner Theresa T. Doan

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TC 2814 - Before Final

Pages: 3, including this page

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Date: May 20, 2005

Re: U.S. Patent Application Serial  
No. 10/816,339

Atty Docket no.: 1007-044

☒ Response to Restriction Requirement

☐ Information

☐ Other

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Tamara Tucker

With reference to serial number 10/816,339, the following are being submitted:

- Fax Cover Sheet with Certificate of Transmission
- Transmittal for Enclosures
- Response to Restriction Requirement

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Substitute for PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0661-0031

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/816,339	
	Filing Date	Mar 31, 2004	
	First Named Inventor	Cheng-Chian Chiang	
	Group Art Unit	2814	
	Examiner Name	Theresa T. Doan	
Total Number of Pages In This Submission	3	Attorney Docket Number	1007-044

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet Response to Restriction Requirement
Remarks:		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mikio Ishimaru
Signature	
Date	May 20, 2005

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Docket Number: 1007-044

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Patent

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors:	Cheng-Chian Chiang et al.	Confirmation No:	8830
Application No.:	10/816,339	Examiner:	Theresa T. Doan
Filed:	March 31, 2004	Group Art Unit:	2814
Title:	SEMICONDUCTOR PACKAGE FOR MEMORY CHIPS		

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir/Madam:


In response to the Office Action of May 2, 2005, wherein restriction has been required, Applicants respectfully elect Claims 1-7 with traverse and without waiving any rights for reconsideration. The election of the group of claims is being made solely to comply with the examiner's requirement.

Claims 8-14 are to be held in abeyance for preparation of a divisional application in the event reconsideration is denied. Applicants respectfully request reconsideration of the requirement for restriction and that the requirement be removed.

☒ No additional fee is required

At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-0374 pursuant to 37 CFR 1.25.

Respectfully submitted,

  
Mikio Ishimaru  
Reg. No. 27,449  
May 20, 2005

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